

# VOGUE

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## WHY demi moore

IS WORTH  
\$12 MILLION  
A MOVIE

**CAN YOU BUY  
GREAT SKIN?**

**DARK VICTORY  
IN BURMA**

A Family Sacrificed  
to Politics

**BERETS AND  
BONGOS**

The Beats Are Back

**THE REASON  
JACKIE**

**WORE PINK**

And Other Secrets  
in the Index

## fall wrap-up

From the  
**HIPPEST TWEEDS &  
the HOT SHORT COAT**  
to the season's  
**SEXIEST DRESS**



Most of us consider visits to the dentist a necessary evil, but more and more people are opening wide for purely cosmetic alterations. Piqued by the possibility of dramatic transformation, SUSAN ROWLAND sinks her teeth into veneers, braces, bleaching, and high-tech breath-freshening.

# reality bites

**T**hankfully, the McCarthyites who thought that fluoridation of town water supplies was a Communist plot failed to stop it in the fifties, and now most American baby boomers and their children have strong teeth. This good news for patients could have been bad news for dentists; but with less need for drilling and filling the teeth of the new generations of fluoride kids, many dentists turned their practices toward the lucrative field of restorative and preventative dentistry. New technology allowed the development of sophisticated techniques to treat dental pathology, and some of these techniques began to be used for purely cosmetic reasons as well. Nowadays the dentally unimpaired of both sexes—from young models and actors whose agents suggest they go to the dentist before their first head shots are taken, to established and familiar stars, to people like you and me—are opening wide for vanity's sake.

Teeth have been altered for health and beauty throughout history. Archaeologists say that ancient Egyptians scraped away decay and used metal fillings, Mayans had jadeite inlays, the Japanese stained teeth black for beauty 4,000 years ago, and Etruscans used animal teeth when they lost their own. Many familiar dental techniques of today originated in the nineteenth century, but processes and materials are changing fast as laboratories and dentists work together to help us modernize our personal infrastructures. The days of removable dentures may soon be over as permanent implants become an alternative. Filed-down teeth and metal-based crowns with an inevitable black line around the gum line are already historical as cosmetic solutions, replaced by porcelain laminate veneers. Bleaching teeth, popular in the 1880s, has been revived by new, efficient methods. Stainless-steel bands used for braces since the mid-1800s are no longer a blight among the teenage population, whose teeth are now straightened with light, almost invisible space-age materials, some actually developed by NASA; and adults who have suffered all their lives from orthodontic methods. If Eleanor Roosevelt were alive now, even her

disastrous teeth could be made to stand as straight as her character.

The most dramatic improvement available through cosmetic dentistry today is the sculpting of teeth with porcelain laminates, which involves removing a thin layer of enamel from the front surface of the tooth and laying in a molded porcelain facade, like a tiny Louis Quatorze tabletop. Among the most famous sets of teeth recently altered with laminates is that of model-of-the-moment Kristen McMenemy. At the Manhattan office of the dentist who created her new image, Larry Rosenthal, D.D.S., I found a seductive argument for such transformation. Kristen's former look was *jolie laide*, punkish. To "make her look lighter, more feminine and endearing," says Rosenthal, he altered the shape, length, and angle of each upper front tooth. He gave Kristen a wider, brighter smile by lengthening the teeth to lift her lip, thickening and angling the side teeth to push out the corners of the mouth, and adding a little overbite on the front teeth "to look sexy." In Kristen's recent photographs she looks very *jolie*—not at all *laide*. Hers was a career decision that has led to increased bookings in a business comparable to horse racing, where peak running time is short for the thoroughbreds and long for the trainers.

After I'd spent an afternoon in Rosenthal's office looking at before-and-after pictures, meeting happy patients, and hearing his hard-sell enthusiasm, anything seemed possible. Who wouldn't want to look like

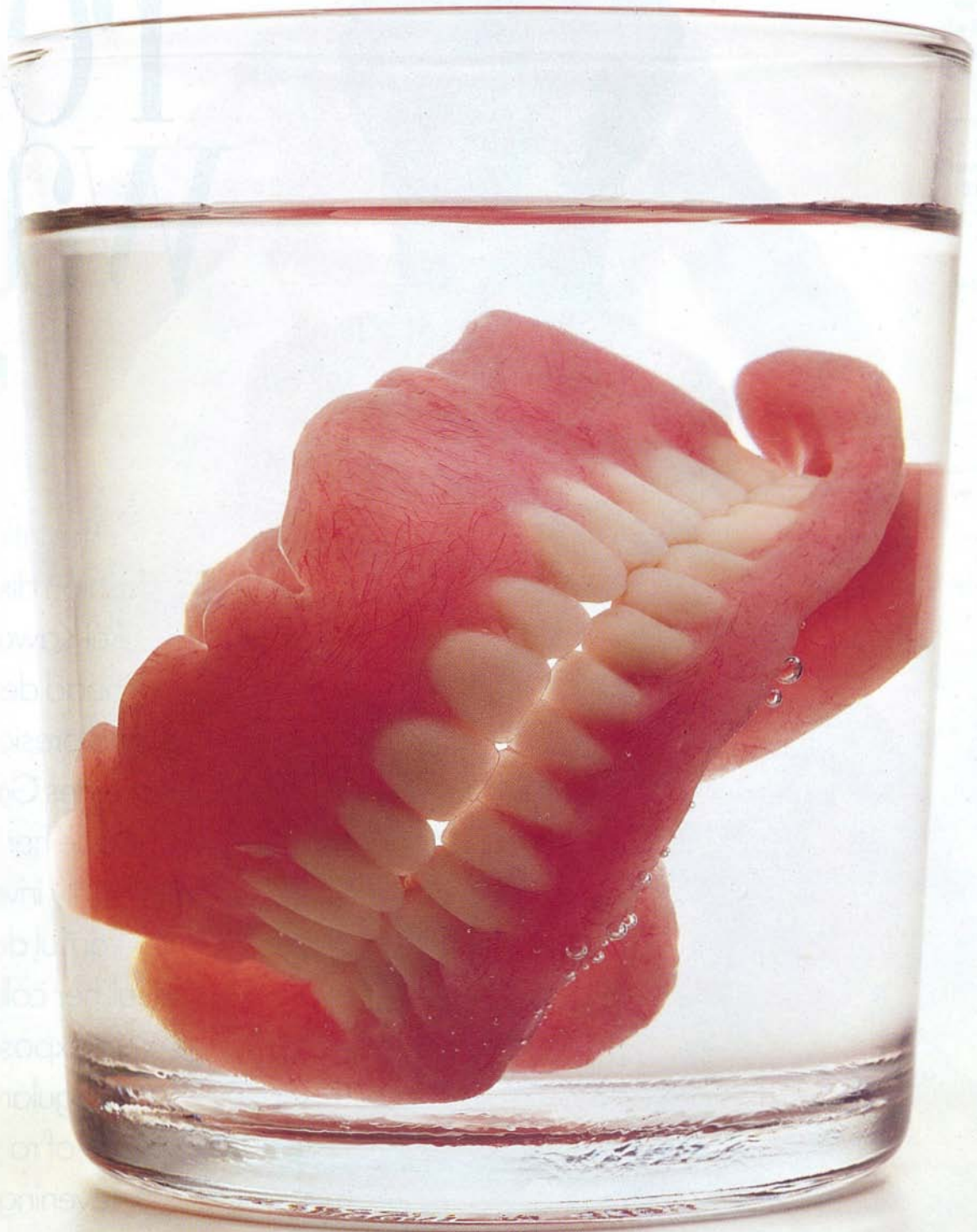
photographs saying he's changed their lives? Bridget, Yasmeen, Frank, Donald, Michael, Beverly, Margaux! Why not have new teeth like computer images made of prospective clients like Pastore, Rosenthal's office manager? Can a person really change her face at the dentist's?

I have to admit I was skeptical, particularly because of the emphasis on the speed and ease of transformation promised by Larry Rosenthal and other cosmetic dentists on the phone and in their brochures. "Plastic surgery without a scalpel," offers one who says he can build up cheekbones and get rid of wrinkles overnight. "Instant (continued on page 376)

#### ANCIENT RELIC?

Thanks to such advances in dentistry as permanent implants, false teeth may soon become a thing of the past.

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Phyllis Posnick  
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treatments work for the face and hands: a TCA peel (using 20 to 25 percent acid on the face; 30 to 50 percent on the hands); an application of **liquid nitrogen**; light **electrosurgery**, in which an ultrafine needle called a Hyfrecator destroys a small amount of the epidermis and the contained pigment cells with electromagnetic energy; and laserabrasion. A TCA peel can be used very cautiously on the chest area, but glycolic acid is safer in terms of depth of penetration. Laserabrasion is also effective for the chest. "It's always best to be conservative and do these procedures gradually to avoid scarring and pigmentary problems," asserts Goldman. "White spots due to hypopigmentation aren't a good trade-off for brown spots."

**Results:** Can be permanent with judicious use of sunscreen.

**Cost:** Prices vary depending on the extent of the damage; repeat treatments may be necessary.

### **BROKEN CAPILLARIES AND SPIDER VEINS**

Fairer, more translucent complexions are more prone to these superficial broken blood vessels, which can be triggered by sun exposure, heat, cold, hormonal fluctuations, and pregnancy. "On the face, broken capillaries can be treated with lasers, cauterized through electrosurgery, or injected with a solution and sclerosed away as they are on the legs," says Goldman.

**Results:** All permanent, but several treatments may be necessary.

**Cost:** Variable according to treatment and extent of damage.

For spider veins on the legs, sclerotherapy is still the best treatment. "An injection of hypertonic saline solution or Sotradeol irritates the linings of the blood-vessel walls, causing them to collapse inward and eventually disappear," says Rothaus.

**Results:** Not immediate. It may take six to eight treatments with injections done regularly over a three-to-four-month period. The area will look darker for up to eight weeks, then should fade. Sometimes a dark spot remains at the point of injection; this can be easily treated with hydroquinone and Retin-A.

**Approximate prices:** \$150 to \$250 per session.

**BIRTHMARKS** Café au lait markings, port-wine stains, and nevi of Ota (bluish lesions that often occur on Asian skin) all respond well to laserabrasion. For port-wine stains, research suggests tackling the problem at an early age: Blood vessels in infants are closer to the surface and less developed than those in adults, making treatment highly effective.

**Cost:** Variable depending on size and type of lesion.

**STRETCH MARKS** Usually found on the breasts, abdomen, hips, and thighs, stretch marks, or striae, are tiny tears in the skin's elastin that occur when skin is stretched beyond capacity. (Pregnancy, rapid weight gain, and pubertal growth spurts are the most common causes.) "Because a stretch mark is a literal break in the structure of the skin, it's difficult to treat," says Rothaus. "You need to fuse the collagen together in order for skin to repair itself. While there's hope for the CO<sub>2</sub> laser in this regard, it's still early in the game."

In the meantime, Biotherm's Biovergeures (\$35) is an over-the-counter treatment purported to minimize existing stretch marks and help prevent new ones from forming.

### **ENVIRONMENTAL DAMAGE**

"The worst environmental offender is UVA light," says Jaliman. "The rays are longer than UVB [burning] rays, and they penetrate into the tissue deeper, activating free radicals and causing silent long-term damage." Cigarette smoke and indoor and outdoor chemical pollutants are equally adept at triggering free radicals, blocking pores, and causing rashes and breakouts. Antioxidants like beta carotene and vitamins C and E effectively neutralize these highly reactive molecules before they can do their damage. "That's why the **over-the-counter antioxidant creams** are great. Anything you can do to slow the breakdown of the skin's collagen and elastin will help prevent aging," says Jaliman. Vitamin C is particularly important because it's responsible for collagen synthesis. "Everyone is born with a certain amount of vitamin C in their skin that dissipates over time," says Jaliman. "Taken orally, it doesn't get back into the skin, but applied topically, it will build back up and help slow down the aging process." Two new vitamin C-rich creams: Estée Lauder Day Wear Super Anti-Oxidant Complex (\$37.50) and Princess Marcella Borghese Cura Vitale Time-Defying Moisturizer with SPF 8 (\$39.50).

Other moisturizing antioxidant creams: Lancôme's new Primordiale (\$42), Chanel's new Total Defense (\$48.50), Prescriptives' Insulation Anti-Oxidant Vitamin Cream (\$40), L'Oréal's new Plénitude Revitalift (\$12). Even more important than an antioxidant cream, however, is the consistent use of high-level sunscreen.

The outcome of any medical procedure depends on the technique and skill of the doctor. Always consult with a board-certified dermatologist on how best to solve a particular problem. "And remember," adds Wexler, "no one can live up to an airbrushed image." □

## **REALITY BITES**

*(Continued from page 342)*

orthodontics," promises another, whose clients are Miss Universe, Miss Houston USA, and Mrs. Texas. They all talk of the perfect smile and rarely mention teeth.

I decided to ask for a second opinion from my own dentist, Dennis Tarnow, D.D.S., the chairman of the department of implant dentistry at New York University College of Dentistry in Manhattan and a periodontist (soft tissue) and prosthodontist (artificial teeth), and his associate, Richard B. Smith, D.D.S., a prosthodontist who performs many kinds of dental procedures, including laminating. At my reports of cosmetic dentists' claims that they could not only create teeth like a beauty queen's but smooth wrinkles, enlarge lips, and make cheekbones look bigger with veneers, Smith looked incredulous.

"Where did you hear that?" he asked. "I can't change the structure of the face with veneers. Porcelain laminates are good for making a strong, lasting surface on fractured, stained, or sensitive teeth. It's cosmetic and restorative and not as invasive as crowns, which require reducing existing teeth down to stubs. I can make teeth straighter and whiter, but there's a limit to how much I can attach to a tooth. Building up a large amount of porcelain on existing teeth may lead to gum disease and bone loss." Tarnow came in between surgical appointments and seconded the opinion. "Of course, puffing out the cheeks could destroy the gums!" he said. "If you want to change your face, that's what plastic surgeons are for! If you had structural problems with your jaw, we could change them, but not with veneers."

Another problem with building up thick veneers, according to Manhattan's Michael Wiland, D.D.S., is that you can't lengthen the teeth and open the jaw more than slightly without causing joint problems. "Excessive lengthening or building out of front teeth is almost as outrageous as removing the back molars to emphasize the cheekbones or having a rib removed for a small waist. People are too influenced by Hollywood," he said.

But Larry Rosenthal insists that his procedures are not that drastic. He says he works away from the gum and builds from the center to the tip of the tooth, where two millimeters of veneer on each tooth can change the arch and consequently the shape of the lips and contours of the mouth for a dramatic difference.

**Where do these conflicting claims leave the poor model or actress whose agent recommends she change her teeth through laminates? "Two millimeters is as thick as two flat sticks of gum. To tout that small addition as a nonsurgical facelift is a hoax,"** says David Garber, D.M.D., an Atlanta periodontist who, along with his associate, Ronald E. Goldstein, D.D.S., is an author and teacher of esthetic dentistry at the Medical College of Georgia School of Dentistry in Augusta. "Veneers are fine for anyone who feels insecure about the appearance of her teeth. I have no problem with fashion as long as it doesn't compromise health. But to change the structure of

the mouth, we still use orthodontia along with laminates or caps and sometimes even facial surgery. There is no substitute for the correct diagnosis followed by the appropriate treatment."

The same adhesive material used in laminates also can be bonded directly to the teeth to change the surface of pitted or stained enamel and to fill in gaps. This composite bonding can be done in one visit and costs about \$400 to \$800 for the front of the tooth, compared with \$1,000 to \$1,500 for a porcelain veneer, but it is old technology, and the dentists I talked to do not like to use it. The material is not translucent, so it never looks natural, nor is it strong. It stains and chips, is plaque retentive, and looks good for only three or so years, during which time you should swear off chewing on ice. However, if you cannot afford porcelain, says Smith, bonding is better than nothing when it's done by a reputable dentist.

Bonding can be used to improve the color of teeth, but bleaching is a common, less invasive alternative. After all my research I was hankering for at least some kind of cosmetic improvement. I opted for whiter teeth, and Smith offered me the home bleaching method. "The process is simple," he said. "I'll make a little model of your uppers and lowers, and tomorrow you'll get a soft plastic tray that will keep the peroxide bleach you fill it with off your gums. Use it two or more hours a day at home until you get the shade you want." In most cases, he says, this is more appropriate than the in-office procedure, which uses harsher chemicals and is more expensive. Drugstore products should be used in close consultation with a dentist, says Smith, because they can have irritating or damaging side effects if not used properly.

Later at the hardware store I find that my teeth are Benjamin Moore off-white #261, which does not look white at all on the paint chart, sort of off-khaki. Kristen's shade in photographs is not even on the chart but is the color of the paper stock—pure white. So, even as I write, my teeth are whitening up underneath a slightly irritating plate that reminds me of the dreaded retainer thrown away when I was fifteen and still appearing in my dreams. Nor have I been diligent now, but after about ten hours my teeth seem shinier and a little brighter, if not yet at Benjamin Moore #260. Coincidentally in Winter Park, Florida, my brother, Jack, has been sitting at his computer, plugged into the stock market, also bleaching as he works, and, like me, paying about \$400 for the process. He tells me that five of his friends are using this way of bleaching, which works on most of life's stains except for tetracycline blackening. Today he called to say he has perfectly white teeth and has stopped using his plate after two weeks. He won, as usual.

But who cares if your teeth are white if your breath is tarnished? Another nonmedical development at the dentist to make you more attractive is new kinds of mouthwash and toothpaste containing chlorine dioxide, a chemical that bonds with the sulfur compounds that cause most mouth odor to eliminate bad breath rather than merely mask it, as commercial mouthwashes do. (Nine-

ty percent of bad breath is caused by sulfur gases, which some people's gum tissues don't absorb very well.) The two main producers making products with chlorine dioxide, Oxyfresh (see page 366) and ProFresh, distribute them primarily through dentists for now (although both companies do a retail mail-order business as well: ProFresh, 800/210-2110; Oxyfresh, 509/924-4999). The three appointments needed to find out whether bad breath exists and to track the cause include one with a periodontist and one with the hygienist, to make sure there are no other causes of bad breath like sinus problems or gum trouble; a lesson in the ancient art of tongue scraping as part of the cleaning system; and a follow-up visit. The price is \$375 at the Manhattan office of Paul Fletcher, D.D.S.; expensive, I thought, but for worriers it's probably worth it.

Of course, the biggest worry is over losing teeth and having to replace them with dentures, common now as people live longer. Implants are the most revolutionary development in dentistry, making possible permanent artificial teeth in extreme cases of tooth loss. Titanium screws are implanted in the bone as roots, and then crowns are attached to this sturdy metal base. Implants involve grueling and expensive surgery (about \$3,000 per tooth with crown), which the English novelist Martin Amis had last year, reportedly for more than \$30,000. He was maligned by the London literary world for his American teeth, but surely any writer whose metaphors for pain are as frequently about teeth as they are in Amis's new novel, *The Information*, deserves dental help. This is a serious medical procedure, not primarily cosmetic, as Amis's critics thought, but it does make good-looking artificial teeth possible. Implants are the last resort for dental cripples and not to be taken lightly. Of course, no dental procedure should be taken lightly, and promises of major changes with no consequences or pain should be bolstered by a second opinion. The American Academy of Esthetic Dentistry (800/993-2626), an association of teachers in the field, will refer you to members closest to you.

After a month of seeing people only as smiles, I have become more fond of aberrations than of store-bought perfection. After all, maybe regularity is just regular. In our ordinary suburban neighborhood in the early 1950s, my brothers and I walked around the block to the orthodontist to have our teeth made ordinary; our parents didn't believe that a little disarray can be as appealing as fallen cherry blossoms in a Japanese garden.

I'm thinking of these powerful beauties: Jackie Onassis with her small canines liting toward the center—belying her formidable control; Jeanne Moreau still laughing at besotted men between her unregimented teeth; and the Wife of Bath, forever famous for her five husbands: "Gap-toothed I was, and that became me well. . . ." If I were young and ambitious I would wish for a delicious gap in the center of my smile, and I would leave it there. □

## DARK VICTORY

(Continued from page 321)

Swayed by the pressure of the growing democracy movement, the military promised to hold democratic elections for a new national parliament at some undetermined date, the first such vote in nearly 30 years. And so Suu Kyi and two other politicians formed the National League for Democracy (NLD). Over the next ten months, Valcrie accompanied Suu Kyi on the campaign trail, making sure she ate enough and took her medicine. She held Suu Kyi down as their car jolted along the rutted roads, preventing her delicate frame from bouncing up and hitting the roof. Across the country, making up to 25 speeches a day, Suu Kyi dazzled the crowds with her simple message of what it is like to live in a democracy. Soon she had become a cult figure.

I caught a glimpse of that adulation shortly after she was released last July. Several hundred people were waiting in front of her home, as they did every afternoon. Surrounded by aides, Suu Kyi strode down her walk and was hoisted by her bodyguards onto a table just inside the front gate. Peering over the metal bars, she spoke into a microphone, smiling, drawing energy from the crowd. "Don't forget the struggle," she told them, but to appease the hovering police, she also urged them to be patient. "Long live Aung San Suu Kyi," they shouted. I thought at the time, it surely would be difficult to return to Oxford.

"When she was in England, she was a caterpillar," says one of her closest political advisers. "But when she came here, she changed into a butterfly. She became a politician."

During the 1988–89 campaign, Suu Kyi's family visited her in Burma when they could, but she didn't let her husband tour with her. Increasingly, Aris remained in the shadows. The tall Englishman with the longish graying hair tried to defy the Rambo image many Burmese hold of Western men; he rarely spoke up around other people, and to blend in he wore the Burmese *longyi* instead of pants. Valerie describes Aris as "very polite, very scholarly. He doesn't really understand what's going on in the ordinary business world."

Suu Kyi's relationship with her country and her family increasingly resembled a love triangle, and the Burmese reveled in gaining the edge over her British husband. Military leaders, for example, refer to Suu Kyi as "Mrs. Michael Aris." Still, several Burmese told me, with obvious pride, how Suu Kyi always put her country ahead of her family.

Apparently duty to country over family runs in her gene pool. According to Ma Than E Fend, a close family friend, Suu Kyi's mother had an iron grip on her emotions. "When news came of [her husband] being shot, she would not let a tear escape," Ma Than E says.